Improving Health Literacy: CDC's Approach

Can you read this?

.htlaeh ruoy tuoba egassem tnatropmi nA

Probably, but would you have even tried if

- Your reading skills were limited?
- Your native language were other than English?
- You were overloaded with work?
- You were scared, stressed, or sick?

Probably not, in which case you would have missed "An important message about your health."

You would not be alone. Just as you may have struggled with that short message, millions of Americans struggle to understand messages about their health; in other words, they have low health literacy.

What is health literacy?

As recently as 5 years ago, health literacy was a concept of which few were aware. Today, health literacy is a public health priority. It is defined as "the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions." For patients, health literacy means being able to follow instructions, manage an illness, and take medications properly. For health care professionals, it means helping patients understand and act on health care information.

What is the problem?

Nearly half (90 million) of American adults cannot understand basic health information, keeping them from the care they need and costing the health care industry billions of dollars. This lack of understanding is mainly because health information is often written well above the level at which most people read. A large part of the problem, therefore, is overestimating reading ability. Reading is a use-or-lose skill, which means that reading grade level is not always the same as highest grade of school completed. In fact, most adults read 3 to 5 grade levels below their highest grade completed. And even conversational skills can misrepresent reading ability because people tend to speak at a few grade levels higher than their reading grade level. Another part of the problem is underestimating who is affected. For the most part, low health literacy parallels US demographics. The fastest growing populations in this country are those most likely to have limited reading skills: people who are immigrants, sick, poor, or older than 65 years. However, people outside these populations can also be affected because everyone's reading level is influenced by circumstances, interest, and time. The stress of receiving a diagnosis of a serious disease, for example, can markedly decrease concentration.

The pamphlet says: "Your mammogram showed a lump suggestive of *cancer*. A biopsy will be required to determine whether this is truly *cancer* or an artifact. If it is *cancer*, the biopsy will also indicate whether it is malignant or benign." The patient sees: "... cancer... cancer..."

The point is that many people *need* health information that is clear and easy to read, and most people *want* health information that is clear and easy to read. The consequences of not providing it are serious. Research has shown that people with low health literacy

- Make more errors with medications
- Are less likely to complete treatments
- Have more trouble with our health care system
- Are more likely to be hospitalized

Such misunderstandings and frustrations cost the health care industry an estimated \$58 billion to \$73 billion a year.

What are some solutions?

Improving the nation's health literacy requires being aware of the problem and taking responsibility for solving it. No one group can do this alone. Government agencies, health care professionals, private industry, patient advocacy groups, community-based organizations, academia, and the health care system must work together. Surgeon General Richard Carmona has made improving health literacy one of DHHS's 6 public health priorities.

Our nation's low health literacy . . . is a threat to the health and well-being of Americans and to the health and well-being of the American health care system. Once people recognize the need to improve their health, health literacy becomes the second step in making a healthier life a reality.

In April 2004, two key reports became available as tools for improving health literacy: The Institute of Medicine published *Health Literacy: A Prescription to End Confusion*, and the Agency for Healthcare Research and Quality published *Literacy and Health Outcomes*.

Another part of the health literacy solution is plain language. People really do want health information that looks easy to read and is easy to read. The mantra, "plain language is dumbing down," is slowly fading as more people realize that plain language simplifies the reading, not the science.

What is CDC doing?

In 2001, a group of 20 employees who shared a passion for improving the nation's health literacy formed the CDC Health Literacy Team. Members have taken advanced training in health literacy and plain language and keep up with the latest research and techniques. Our first task was surveying CDC's leaders to gauge their knowledge of, and interest in, plain language. Using that information, we have since been busy creating awareness, providing training, and enlisting support for health literacy efforts. The team has been compiling lists of all the great work being done at CDC to promote health literacy and has been sharing this information with the HHS Health Literacy Work Group and others. Health Literacy Team members are also available as resources for the rest of CDC. We offer training, advice, and support to help you improve your health literacy efforts. We are here to help you help others.